

PCT

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REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty

Box No. I TITLE OF INVENTION

Broadcast control

Box No. II APPLICANT

This person is also inventor.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

Evolution Broadcast Pty Limited
Cnr Epping and Delhi Roads
North Ryde New South Wales 2113
AUSTRALIA

Telephone No.

Faximile No.

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:

AU

State (that is, country) of residence:

AU

This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box for the purposes of:

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

STONEHAM, Mark
Royalist Road
Mosman New South Wales, 2088
AUSTRALIA

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

AU

State (that is, country) of residence:

AU

This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box for the purposes of:

Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: agent common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

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Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.